COVID-19 and Cancer Survivors: What Do I Need to Know?

The COVID-19 virus that has spread across the world has caused worry for everyone. For survivors of childhood, adolescent, and young adult cancers, we know that the worry may be even higher. Here are answers to some general questions you may be asking. For specific questions about your own health, talk to your health care provider.

As a cancer survivor, am I at increased risk for developing COVID-19?

- Current information suggests that your cancer history alone does not increase your risk for developing COVID-19
- However, you may have increased risk for contracting COVID-19 if you have lowered immunity due to:
  - Certain health conditions, such as chronic graft-versus-host disease
  - Certain medications, such as corticosteroids or immunosuppressant medications used to treat autoimmune diseases (for example, asthma, lupus, and arthritis) or medications that prevent or treat graft or organ rejection (for example, after bone marrow or solid organ transplant)
  - Current or recent (within the past 6 months) treatment with chemotherapy
- You can protect yourself by taking precautions to lessen your chance of exposure, and by getting the vaccine as soon as you are able.

As a cancer survivor, should I get the COVID-19 vaccine?

- Yes, you should strongly consider getting the COVID-19 vaccine as soon as you are eligible for it.
- A small number of people are allergic to one of the vaccine components. If you have had a severe allergic reaction to polyethylene glycol (PEG) or to polysorbate, check with your health care provider to determine which formulation of the vaccine is best for you.

How can I protect myself from getting infected with COVID-19?

- Until you are fully vaccinated, you should follow strict precautions to lower your chance of infection:
  - Keep a safe distance (3 to 6 feet) between you and other people, if at all possible
  - Wear a mask when around unvaccinated people outside of your household
  - Avoid social gatherings and crowds of people
  - Avoid poorly ventilated indoor spaces
  - Stay away from anyone who is sick
  - Wash your hands often with soap and water. Use hand sanitizer when soap and water aren’t available.
- Continue to follow COVID-19 precautions as advised by your national and/or local authorities, even after you are fully vaccinated.
As a cancer survivor, am I at increased risk for complications if I get COVID-19?

- There is currently limited information available about cancer survivors who have developed COVID-19 infection.
- Based on what is known about other viral respiratory illnesses, it is likely that survivors who have chronic health conditions affecting the heart or lungs may be at higher risk for complications if they develop COVID-19 infection. These include conditions such as:
  - Pulmonary fibrosis (lung scarring) or chronic lung disease
  - Cardiomyopathy (weakened heart muscle) or coronary artery disease
- It is also possible that survivors who received treatments that may damage the heart or lungs may be at increased risk for complications if they develop COVID-19 infection. These treatments include:
  - Anthracycline chemotherapy (such as doxorubicin and daunorubicin)
  - Bleomycin, busulfan, carmustine, or lomustine chemotherapy
  - Radiation involving the heart or lungs, including total body irradiation (TBI) and radiation to the chest, axilla, abdomen, or spine
- In addition, based on what is known in the general population, certain health conditions may increase the risk for complications related to COVID-19 infection. These include conditions such as:
  - Chronic kidney disease
  - Chronic lung disease
  - Diabetes (type I or type II)
  - Down syndrome
  - Heart disease
  - High blood pressure (hypertension)
  - HIV
  - Liver disease
  - Overweight or obesity
  - Pregnancy
  - Sickle cell disease or thalassemia
  - Smoking or vaping
  - Stroke or cerebrovascular disease
  - Substance use disorders
  - Being over the age of 65 years

If you have any of these conditions, it is important that you take steps to keep them well controlled. If you are running low on any of your medications for these condition(s), contact your health care provider for refills.

What should I do if I am not feeling well and think that I may have COVID-19?

- In non-emergency situations, call ahead for medical advice before visiting your health care provider or hospital, so that you can determine what next steps are needed.
- Be sure to tell your health care provider that you are a cancer survivor.
- If you have chronic health conditions that may increase your risk for complications related to COVID-19 infection (for example, heart or lung problems, or diabetes), be sure to tell your health care provider.
If you have been told that the cancer treatment you received places you at high risk for lung or heart problems (such as from chest radiation or certain chemotherapies), be sure to tell your health care provider.

Bring your cancer treatment summary with you if you are told to go to the clinic or hospital.

Is there anything else I can do?

- We recognize that this is a stressful time for everyone
- COVID-19 information continues to change frequently
- Please talk to your health care provider about any questions or worries you may have during this time

Additional health information for childhood cancer survivors is available at www.survivorshipguidelines.org

Note: Throughout this Health Links series, the term “childhood cancer” is used to designate pediatric cancers that may occur during childhood, adolescence, or young adulthood. Health Links are designed to provide health information for survivors of pediatric cancer, regardless of whether the cancer occurred during childhood, adolescence, or young adulthood.

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Introduction to Late Effects Guidelines and Health Links: The Long-Term Follow-Up Guidelines for Survivors of Childhood, Adolescent, and Young Adult Cancers and accompanying Health Links were developed by the Children’s Oncology Group as a collaborative effort of the Late Effects Committee and Nursing Discipline and are maintained and updated by the Children’s Oncology Group’s Long-Term Follow-Up Guidelines Core Committee and its associated Task Forces.

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